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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)										
	In re Application of	Kaempfer										
	Application Number	09/801,371	Filed March 7, 2001									
	For	REGULATION OF GENE										
	Group Art Unit	1645	Examiner									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee areas follows (check time period desired):</p> <table> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$ 110 _____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$ _____</td> </tr> </tbody> </table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>55</u>.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-4377</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor  <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.  <input type="checkbox"/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  <input checked="" type="checkbox"/> attorney or agent of record.  <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p><u>7/18/01</u> <u>Rochelle K. Seide</u>  Date Signature</p> <p>32,300 _____  PTO Reg No. _____ Typed or printed name _____</p> <p>NOTE: Signatures of all inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are resubmitted.</p>			<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110 _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
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